

# State of Arizona



## Campaign Finance Report

**AZ ACADEMY OF FAMILY PHYSICIANS POLITICAL ACTION COMMITTEE - AZAFP PAC**  
**Committee #: 200402636**

**Treasurer: PERRIN, EDWARD**  
**5320 N 16th St, Ste 102, Phoenix, AZ 85016**  
**Phone: (602) 274-6404**  
**Email: lhahn@azafp.org**

### 2004 Pre-Primary Election Report

Election Cycle: **2003-2004**  
Date Filed: August 20, 2004  
Reporting Period: June 1, 2004-August 18, 2004

### Summary of Finances

Cash Balance at Beginning of Reporting Period:	\$0.00
Total Cash Receipts this Reporting Period:	\$555.00
Total Cash Disbursements this Reporting Period:	\$0.00
Cash Balance at End of Reporting Period:	\$555.00

Report ID: 24084

## Summary of Activity

Filed on 08/20/2004

Income	Schedule	This Period			Total to Date
		Cash	Other	Total	
Personal and Family Contributions	C1	\$0.00	\$0.00	\$0.00	\$0.00
Individual Contributions	C2	\$555.00	\$0.00	\$555.00	\$555.00
Contributions from Political Committees	C3	\$0.00	\$0.00	\$0.00	\$0.00
Business Contributions	C4	\$0.00	\$0.00	\$0.00	\$0.00
Small Contributions	C5	\$0.00	\$0.00	\$0.00	\$0.00
CCEC Funding and Matching	C6	\$0.00	\$0.00	\$0.00	\$0.00
Qualifying Contributions	C7	\$0.00	\$0.00	\$0.00	\$0.00
Loans Made to this Committee	L1	\$0.00	\$0.00	\$0.00	\$0.00
Other Receipts, including Interest and Dividends	R1	\$0.00	\$0.00	\$0.00	\$0.00
Transfers from Other Committees	T1	\$0.00	\$0.00	\$0.00	\$0.00
Cash Surplus from Previous Committee	S1	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total Income</b>		\$555.00	\$0.00	\$555.00	\$555.00

Expenditures	Schedule	This Period			Total to Date
		Cash	Other	Total	
Operating Expenses	E1	\$0.00	\$0.00	\$0.00	\$0.00
Independent Expenditures	E2	\$0.00	\$0.00	\$0.00	\$0.00
Contributions to Other Committees	E3	\$0.00	\$0.00	\$0.00	\$0.00
Other Expenses	E4	\$0.00	\$0.00	\$0.00	\$0.00
Transfers to Other Committees	T1	\$0.00	\$0.00	\$0.00	\$0.00
Loans Made by This Committee	L2	\$0.00	\$0.00	\$0.00	\$0.00
Expenditure of In-Kind Contributions	C8	\$0.00	\$0.00	\$0.00	\$0.00
Disposal of Surplus Cash	S1	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total Expenditures</b>		\$0.00	\$0.00	\$0.00	\$0.00
Bill Payments for Previous Expenditures	D1	\$0.00		\$0.00	\$0.00
<b>Total Cash Disbursed</b>		\$0.00			

PAC

**Schedule C2 - Individual contributions**

		Date	Amount	Cycle To Date
<b>Name:</b>	HAROLYN GILLES	07/18/2004	\$5.00	\$5.00
<b>Address:</b>	7891 E Camino Vivaz, Scottsdale, AZ 85255		Cash	
<b>Occupation:</b>	FAMILY PHYSICIAN			
<b>Memo:</b>	cash donation			
<b>Name:</b>	AMALIA PINERES, M.D.	07/21/2004	\$300.00	\$300.00
<b>Address:</b>	108 S Broad St, Globe, AZ 85501		Cash	
<b>Occupation:</b>	FAMILY PHYSICIAN, ALMA MEDICAL CENTER			
<b>Memo:</b>	donation for tort reform			
<b>Name:</b>	KAIB, SUSAN	07/23/2004	\$50.00	\$50.00
<b>Address:</b>	6134 E Wilshire Dr, Scottsdale, AZ 85257		Cash	
<b>Occupation:</b>	FAMILY PHYSICIAN			
<b>Memo:</b>	summer seminar honorarium			
<b>Name:</b>	EGENE SAVIN	08/03/2004	\$200.00	\$200.00
<b>Address:</b>	5886 S. HOSPITAL DRIVE, CLAYPOOL, AZ 85532		Cash	
<b>Occupation:</b>	FAMILY PHYSICIAN, SAVIN MEDICAL CENTER LLC			
<b>Memo:</b>	PAC			
Total of Individual Contributions			\$555.00	
Total of Refunds Given			\$0.00	
Net Total of Individual Contributions			\$555.00	

